

ACCEPTANCE



EQUITY



AWARENESS



6TH BIENNIAL

BODY IMAGE AND SELF-ESTEEM CONFERENCE

NEDIC CONFERENCE HIGHLIGHTS • MAY 11TH & 12TH, 2017.

“Riveting. Powerful. Relevant. NEDIC’s Conference was truly transformational!”

These are just some of the words delegates used to describe NEDIC’s 6th biennial Body Image and Self-Esteem Conference constructed around the ideas of Acceptance, Awareness, and Equity.

The two day program offered a rich and diverse line-up of speakers who shared their latest research and real world experiences with over 300 eager clinicians, dietitians, educators, health care practitioners, students and parents.

A big thank you to all of our conference sponsors for their commitment to our mission and for making this year’s event a success. We were thrilled to welcome back our returning Presenting Partner, the Dove Self-Esteem Project, who have been an instrumental sponsor of the conference every year since its inception. We are also grateful to our Conference Partner, the University of Toronto Faculty of Kinesiology and Physical Education for their continued in-kind support. Special thanks to our returning Nutrition Sponsor, the Dairy Farmers of Canada, and to our free community evening sponsor, Aerie. NEDIC recognizes the ongoing support of our gold, silver and bronze level supporters, Shire, SickKids Foundation, Penningtons, the Ontario Teacher’s Insurance Plan Community Fund, as well as our coffee break sponsors Under the Lilac Tree and Waterstone (part of the Edgewood Health Network).

We would like to also acknowledge our volunteer steering committee who worked tirelessly to make this year’s event a huge success. Thank you as well to the dozens of volunteers who so generously gave their time and energy to ensure that the conference registration and presentations ran smoothly.

Lastly, we would like to thank each of our delegates for taking time out of their busy schedules to commit to learning more about body image, self-esteem and eating disorders. Through these shared insights, inspirations and personal connections, let’s continue to celebrate body equity and embrace our diversity.

Sincerely,
The NEDIC Team



OPENING KEYNOTE 1 HEALTH FOR EVERY BODY: UNDERSTANDING AND ADDRESSING THE REAL CAUSES OF POOR HEALTH

Jon Robison, PhD, discusses how health behaviours account for less than 25% of the disparities across our nations and how the social determinants of health need to be addressed if we are going to help people come to peace with their bodies and food and improve their health.

Key Highlights:

1. Discusses the social determinants of health and how socioeconomic status and physical environment contribute to the “health” status of individuals in different and cultured communities.
2. Challenges what is typically considered perfect health and the idea that it can be achieved in 10 days or 8 and 12 weeks.
3. Is complete and optimal health possible? Robison redefines health. Health is not the freedom from inevitability of death, disease, unhappiness and stress but rather the ability to cope with these things in a competent and informed way.

WORKSHOP 1 CRITICAL MEDIA LITERACY AND BODY LITERACY

Educators **Lorayne Robertson, PhD**, and **Joli Scheidler-Benns and Sielen Raoufi, RD**, speak to the necessity of building critical media literacy, and suggest tools to help youth do so.

Key Highlights:

1. Kellner and Share provide the theoretical framework, demonstrating levels of media literacy moving from the outdated protectionist model to the evolving critical media literacy.
2. Critical media literacy discusses the politics of representation and power, and empowers youth through analysis and creation of images.
3. Youth who are exposed to so much media in so many forms, and need the tools to survive and be resilient. Most curricula are superficial, but resources like teachbodyimage.com can help.

SESSION 1 DIVERSE BODIES ON THE MOVE: REDRESSING STIGMA AND INEQUITABLE POWER RELATIONS IN PHYSICAL CULTURE

Dr. Margaret MacNeill, PhD, and co-presenters discuss size, racialized, transnational, gendered and healthist stigma in their session geared towards identifying intersectionality and encouraging individuals to re-think issues of body-based stigma.

Key Highlights:

1. Diverse bodies have the right to health and dignity and redressing stigma requires us to:
 - Tackle the various forms of stigma;
 - Reflect on our understanding of risk;
 - Rethink body positivity;

- Listen to understand;
 - Challenge biological assumptions, norms and power relations and,
 - Consider how we promote or deny pleasures in movement.
2. Racial tropes can manifest themselves – for instance, the belief that South Asian girls are good at academics, and not sports, can take away from the hard work that these young women put into their academic careers.
 3. Emphasizes the need to be mindful of performance expectations. Gender should not be a performance!

SESSION 2 USING DIALECTICAL BEHAVIOURAL THERAPY (DBT) SKILLS TO PROMOTE BODY ACCEPTANCE

Danielle MacDonald, PhD, CPsych has assumed a number of roles in her career. Her discussion on Dialectical Behavioural Therapy speaks to her work at EBT3 where she is providing DBT to clients with BPD and related concerns, and discusses how it may be used to promote body acceptance for everyone and every body.

Key Highlights:

1. DBT emphasizes finding the truth in two positions that seem to be in conflict. The core dialect is between acceptance and change; accepting reality and changing what can be changed can reduce suffering.
2. DBT skills involve doing things differently. For body acceptance, this involves

learning to accept one’s body the way it is in order to reduce negative emotions and coping behaviours. Mindfulness fosters nonjudgmental acceptance.

3. Mindfulness of emotions means acknowledging and experiencing them without acting on them, which can help in reducing urges or actions that exacerbate suffering. Distress tolerance skills enable one to experience distress without acting on it.

SESSION 3 GENDER AND BODY IMAGE OUTSIDE OF THE BINARY: PROMOTING SELF-ESTEEM IN TRANSGENDER AND GENDER FLUID YOUTH

Heidi Dalzell, PsyD, CEDS, and **Kayti Protos, LCSW**, present the current research on the relationship between gender identity and disordered eating behaviours and allow delegates to explore ways to increase body confidence in trans- and gender-fluid youth.

Key Highlights:

1. Gender identity exists on a continuum and it is impossible to tell just by looking at someone which gender they identify with.
2. The coming out process can be extremely distressing for the person coming out or for their loved ones. Many transgender youth contend with several emotional challenges throughout their developmental stages.
3. Body image can be exceptionally complicated for

transgender and non-binary youth. There are cognitive, perceptual, affective, evaluative, social and kinesthetic factors that impact one’s body image and perception of self.

SESSION 4 THE BODY PROJECT CANADA: EVIDENCE-BASED EATING DISORDERS PREVENTION AND BODY IMAGE EMPOWERMENT IN ACTION

Alan Duffy, MS, Colleen Conroy Amato, MSW, RSW, Patricia Nash, MEd, and **Cathy Skinner** discuss the Body Project program and how it may be implemented in college, high school and community settings.

Key Highlights:

1. The Body Project Canada, an initiative dedicated to combatting body dissatisfaction and issues in body image, has expanded significantly in the past 5 years. They are working towards incorporating programs that include males.
2. Discuss language reclamation and utilizing words in a way that is more inclusive and sensitive.
3. The program involves peer-led initiatives designed to facilitate connections, and cultivate patient-resiliency so they may challenge body-shaming ideals.
4. Involvement with well-trained peers is based on research that has indicated that peer relationships work best.

SESSION 5

BOOTY SHORTS AND SEXTING: A SOCIAL JUSTICE APPROACH TO IMPROVING BODY IMAGE AND SELF-ESTEEM

Dr. Angela Grace has worked as an elementary school teacher and psychologist in youth mental health. Her presentation discusses social justice approaches to healthy body image and diversity acceptance in youth as she challenges delegates to implement prevention in school settings and promote student voices.

Key Highlights:

1. Student voices may provide insights into gendered, relational and power experiences that impact their body satisfaction. Changing educational policy to include primary focus on listening to student voices can be a powerful way to access students' actual experiences in the school environment.
2. Developmental theory of embodiment defined as the social experiences that shape an individual's body experiences in the physical domain (agency, functionality, voice), mental domain (exposure to dominant social labels and expectations) and through social power.
3. Students can identify practical and creative ways to transform the school environment to create a healthier environment for all.

AFTERNOON PLENARY

RADICAL CHANGE: THE PATH TO SELF-ACCEPTANCE

Dianne Bondy, celebrated yoga teacher, social justice activist and leading voice of the *Yoga For All* movement, discusses self-acceptance and the importance of reversing our internal narratives that keep us feeling powerless and excluded.

Key Highlights:

1. There are external voices that often tell us who we are and what we are capable of. We often internalize these messages and become too critical of ourselves. It is important to combat these messages through intention setting.
2. Every body has different abilities. Many of these abilities are based purely in genetics. It is important to be aware of this and escape the comparison trap. Where you are in your body and where someone else is in their body is completely unrelated. We are all on individual journeys and where we are is valid. Your body is the only instrument you have to enjoy this life.
3. You are not your social conditioning. It is important to take up space and take your power back.

SESSION 6

INTOXICATING CYCLES OF SHAME: THE MISSING LINK IN THE TREATMENT OF CO-OCCURRING EATING AND SUBSTANCE ABUSE DISORDERS

Margaret Nagib, PysD, a clinical psychologist and current faculty member at the Timberline Knolls' Clinical Development Institute, specializes in the treatment of eating disorders, trauma, addiction, self-harm and mood disorders. Her discussion, focusing on shame, also highlights the benefits of spirituality and the importance of inner healing.

Key Highlights:

1. Research shows that the experience of shame is common to both eating disorders and substance use concerns. Addressing the cycles of shame is a vital part of treating the two when presented both concurrently and independently.
2. Discusses the difference between true guilt, as in "I did something wrong", and false guilt, as in "I AM wrong", and how confusing the two is a factor in the presentation of shame behaviours.
3. The intoxicating cycles of shame move us away from our spiritual beings, perverts identity and excludes us from others.

SESSION 7

MOVING BODY ACCEPTANCE OFF THE MAT AND INTO THE WORLD

Michelle Pitman, CPT, RYT200, works with those struggling with eating disorders and body image disturbances. With her experience and training as a yoga and fitness

instructor, she is a true advocate for client personal health and well-being, and a believer that movement and embodiment practices are key to self-discovery, connection and healing.

Key Highlights:

1. As health professionals, we are in the caring profession making us particularly vulnerable to compassion fatigue and burnout. Self-care is good! Pitman discusses the benefits of bringing restorative yoga to the workplace so professionals can rejuvenate themselves and thus, serve others better!
2. The practice of Yoga has become westernized in that it is now considered just another form of exercise and a series of poses to master. It is far more than that – it requires mindfulness and self-reflection, for we are layered beings.
3. Embodiment and mindfulness begins in the body. We think of mindfulness as a continuum and the goal is to have individuals feel their way into the experience of yoga instead of being directed.

SESSION 8

BEYOND IMAGES: DELVING INTO NEDIC'S GRADE 4-8 CURRICULUM

Heather Thompson, OCT and **Helen Vlachoyannacos, OCT**, have integrated their love for literacy with their passion for promoting positive body image and self-esteem. As elementary school teachers, they have focused on working with students to build resiliency and positive self-esteem. Their discussion

speaks to their work, specifically that which involves community development and parent/family inclusivity.

Key Highlights:

1. Beyond Images is a curriculum designed to address issues in media literacy by creating awareness and building a critical capacity. The core concepts focus on the construction, beliefs and values, audience, intent and form among media literacy.
2. The media is a crucial component of the classroom, so educators are encouraged to address issues that arise and be mindful of their delivery of such content.
3. Though designed for a specific grade group, the material is generalizable to any age group or grade. It is designed as a starting point, so educators are encouraged to move beyond to further incorporate inclusivity and self-acceptance.

SESSION 9

MIRROR MIRROR: QUEER MEN AND BODY IMAGE IN HEALTH & MENTAL HEALTH SETTINGS

Rahim Thawar, MSW, RSW, currently working as is a consultant and clinical counsellor on a family health team and in private practice. He operates from a harm reduction, sex positive, anti-oppressive and trauma-informed approach. He provides mental health counselling in LGBTQ/HIV-affected communities – his discussion is not only representative of his work in the field, but also speaks to the area of addiction and mental health.

Key Highlights:

1. Statistical information about what puts people at higher risk for illness/disease should not be conflated with any particular individuals' health status/well-being
2. Body image and gay beauty has changed over time and continue to shift with societal ideals and conditions.
3. Discussed the link between the perception of one's beauty and how one receives love from others. Your body and the way you treat it, perceive it and care for it, can become your armour and used to combat the experience of rejection and oppression.

OPENING KEYNOTE 2 PRIVILEGE AND THE BODY: FROM CRITICAL AWARENESS TO ENHANCED EQUITY AND ACCEPTANCE

Niva Piran, PhD, a professor, Fellow member of the APA and Academy of Eating Disorders and co-editor of a number of books, discusses privilege and challenges delegates to explore the strategies for countering the transmission of privilege through the representation of bodies.

Key Highlights:

1. Girls' drawings of the "self" or "ideal" girl/boy reflect the intersection of various kinds of privilege and disenfranchisement, and it is important for adults to connect with their experiences in order to validate and empower girls.

2. Girls often have critical observations about embodied equity that are unvoiced and so discussing and reframing with adults can aid girls in understanding and then transforming those experiences into activism.
3. Taking up space is a meaningful act, both personally and politically. Privileging some bodies over other bodies maintains the social status quo.

WORKSHOP 2 A WEIGHT NEUTRAL APPROACH TO HEALTH & WELLNESS

Ann McConkey, RD, and Lisa Naylor, CYC, have adopted a weight neutral approach to supporting individuals with eating disorders. Both are passionate about reducing weight bias and stigma, promoting body peace in the cultural war on diverse bodies, and fostering compassion and body equity so people of all shapes and sizes feel valued and worthy.

Key Highlights:

1. Weight bias and stigma are human rights issues, and are detrimental to people's health. It is important for health care practitioners to be aware of, and challenge, their biases. People who experience weight stigmatization in health care settings are more likely to avoid or delay seeking health care and formal support.
2. Body inclusivity is an essential component of respectful care. Health care settings should be equipped to accommodate all types of

- bodies – including LGBTQ, differently-abled, Indigenous, etc.
3. Consider using an "add-in" approach to promoting healthy living. For example, adding breakfast or more time doing enjoyable outdoor activities with family instead of telling people what to avoid or limit.

SESSION 10 INVISIBLE WOMEN: EATING DISORDERS AND THE PRESSURE TO BE PERFECT AT MIDLIFE AND BEYOND: A RELATIONAL CULTURAL APPROACH

Margo Maine, PhD, CEDS, Founder and Advisor of NEDA, Founding Fellow of the Academy of Eating Disorders and author of a number of books, discusses the relentless pressure on women of all ages and developmental stages to be perfect, and how we can become better equipped to empower midlife and older women to move them forward in recovery.

Key Highlights:

1. Age does not immunize women from body image preoccupation and weight concerns. Disordered eating and a fear of aging go hand-in-hand for many women.
2. Adult patients have the same medical sequelae as younger patients.
3. Fluid expertise honours the expertise shift. Both the client and the clinician bring knowledge to their exchange to build on their understanding of presented concerns and create new

pathways that foster recovery.

SESSION 11 NAVIGATING DIFFERENCES WITHIN EATING DISORDERS AND "THE OTHER": WHAT THE PROFESSIONAL BRINGS AND WHAT THEY LEAVE BEHIND

Andrea LaMarre, MSc, and Kaley Roosen, MA, are both PhD students engaging in critical scholarship around eating disorders and health care. Both are passionate about facilitating inclusive healthcare and respect for body diversity and believe that eating disorder treatment needs to become accessible to more diverse individuals.

Key Highlights:

1. There is limited representation in the literature for people with eating disorders who are disabled, queer, trans, non-binary, men, racialized, fat, poor, older or any configuration thereof.
2. In the current ED world, we make presumptions of risk and immunity. We assume who is at risk and who is immune and this means therefore prevention strategies, treatment, and research are all geared accordingly. This has treatment, psychological, and social impacts.
3. We each carry implicit bias based on our own social location and identities. White supremacy culture is present in our field and it is important to challenge this in order to break down barriers

for marginalized folks affected by eating disorders.

SESSION 12 UNDERSTANDING THE INTERSECTION OF SOCIAL JUSTICE AND BODY IMAGE #BODYJUSTICE

Melissa Fabello, MEd, activist, scholar and Managing Editor of Everyday Feminism, and Sonalee Rashatward, MEd, LSW, a social worker and sex therapist, are devoted to incorporating social justice, feminist theory and body equity into their work. Their presentation speaks to their work as they discuss systemic body oppression and body image trauma.

Key Highlights:

1. Intersections of identity are frequently ignored in our current practices and if we are to fully understand our bodies, there is a need to take a radical social justice perspective and lens.
2. Race eugenics was once considered science; homosexuality was once a mental disorder; apartheid, slavery and colonialism was legal. Science is biased and so is the law and society. Presenters discuss the need to challenge the status quo and see beyond power to justice.
3. Emphasize the need to find new role models, adjust our visual diet and explore our desire mapping.

SESSION 13 THE mBODIMENT PROJECT: BODY POSITIVITY WORKSHOP

Incredibly passionate about body sovereignty, radical vulnerability and transformative approaches to building equitable relationships and communities, **Sookie Bardwell, BEd**, and co-presenter **Frank Colosimo**, focus their discussion on intersectional anti-oppression techniques and the m.Bodiment Project that speaks to body image concerns experienced by gay, bi- and trans men.

Key Highlights:

1. Discussed safe space as critical in any and all interactions with individuals regardless of their ethnicity, chosen gender, sexuality, and identity.
2. Intersectionality plays an incredibly large role in how our identities are established and accepted in society. While there is hope for change and increased acceptance of the LGBTQ+ community, there is a need for language reclamation.
3. Discussed times that we have felt uncomfortable in our bodies and difficulties accessing space because of society's definitions of "attractive" within the LGBTQ+ community.

SESSION 14 CRITICAL MEDIA LITERACY AND FOOD LITERACY

Lorayne Robertson, PhD, Sielen Raoufi, MHSc, RD, and Joli Scheidler-Benns, all with a background in education and public health, base their discussion on the influence of technology in education, critical

media literacy and critical health literacy. In their development of prevention techniques, nutrition programs and resources for teachers, parents and students, presenters attempt to increase awareness of the manipulative and degrading components of media propaganda.

Key Highlights:

1. Critical media literacy regarding food is important in educating individuals on the issues within advertisements and media propaganda. We need to be mindful of how the food that we consume is presented to us in the media.
2. There are initiatives in place, such as Bill S-228, designed to create more awareness on the ways media and ads manipulate information to better appeal to consumers.
3. It is important to encourage critical thinking at a young age so that we are able to question and reject the messages being relayed to us.

**AFTERNOON PLENARY
FROM MARGINALIZATION TO
LOVE: HOW RESISTING THE
GENDER BINARY TAUGHT ME TO
RESPECT MY BODY**
Linda Bacon, PhD, in her attempt to foster global transformation towards body respect, speaks about conforming to expectations and what it means to be a woman, man, or non-binary individual in today's society.

Key Highlights:

1. Conforming to expectations of what it means to be a man or a woman provides

privileges: better jobs, greater social approval, etc. Living outside of gender expectations can mean bullying, discrimination, social rejection and worse. This cultural power is further complicated by intersections with other identities.

2. Gender is socially constructed, not a fact of nature. Few of us feel comfortable in the binary boxes of "man" and "woman" all of the time and in all ways. Most people have at least twinges if not a constant feeling of not measuring up to gendered beauty standards. Some transgress gender norms in big ways, like transitioning to a gender different from that assigned to them at birth. For others, transgression is more modest.
3. Emphasizes the importance of using language respectfully. For example, describing others with the words they use to describe themselves, recognizing that you cannot always know someone's gender identity by looking at them, asking and correctly using the pronouns that make others feel most comfortable as one of the most basic ways of showing respect for gender identity and being mindful of respectful "in-group naming."

SESSION 15 EXPLORING STIGMA TOWARDS INDIVIDUALS WITH BED AND MDD

Dr. Gina Dimitropoulos has extensive experience in a number of health care settings delivering therapy and counselling to individuals with mental health concerns. **Emily Williams, MSc**, and **Laura Henderson, MA**, are both PhD students at the University of Calgary interested in the areas of stigma, disclosure and eating disorders/body image issues in men.

Key Highlights:

1. The experiences of stigma differ among the many different forms of eating disorders.
2. Weight bias is one of the most common and prominent forms of discrimination, occurring most commonly in the professional fields within the health care system.
3. Presenters conducted an online study consisting of graduate students (i.e. clinical, social work, nursing, etc.) who were given vignettes and asked about their perceptions. The findings indicated MDD is the most, and Anorexia Nervosa is the least stigmatized eating disorder.

SESSION 16 NOURISHING CONNECTIONS: USING AN INTERDISCIPLINARY APPROACH TO PROVIDING CARE TO YOUTH

Dr. Ayisha Kurji, MD, Terri Peterson, MSW, RSW, and Kayly Yablonski, BSW, RSW, are dedicated to the treatment of people with food and body image issues. All three

emphasize the importance of supporting patients from an interdisciplinary perspective. They believe in empowering patients to make positive changes and better their relationships and familial connections.

Key Highlights:

1. Intervention techniques tailored to individual clients are most effective, especially when they are implemented early, intensively, and when they incorporate an interdisciplinary team of professionals dedicated to client needs
2. Presenters share their practice framework and highlight the need for treatment to include multi-disciplinary team members in the same appointment. Presenters emphasize how the collaboration and co-design improve outcomes in patients with eating disorders or body image concerns
3. The use of family and caregivers in therapy lends well to the recovery of patients, because there is the opportunity for them to build an alliance with that significant other and develop a plan that is cultured and mutually beneficial.

SESSION 17 COMMUNITY INTEGRATED CARE: AN ANTI-OPPRESSION AND ARTS- BASED APPROACH TO ADDRESSING MARGINALIZATION IN EATING DISORDERS CARE

Rachel Nolan, a music therapist, and **Olivia Strohschein, MA**, have explored the use of music therapy

and arts-based practices in eating disorder recovery. Their discussion, based on their practice and current research, highlights the community and anti-oppressive recovery models that focus on the affective body and how we can support populations marginalized based on gender and their experience of trauma.

Key Highlights:

1. Presenters emphasize the importance of solidarity and inclusivity as tools to reduce the power imbalance in community-integrated care
2. Arts therapy can provide a way for individuals to express their experiences and oppressions – it is a great way to bond with other community members who may be struggling with similar internalized oppressions.
3. Presenters emphasize the need to make health care for eating disorders more accessible to community members while recognizing how different forms of oppression can prevent individuals from accessing appropriate care and support.

SESSION 18

THE POWER OF STORIES

Carrie Cox, BEd, PhD (ABD), having recovered from her own eating disorder, is an advocate, teacher, poet and mother. Integrating her research and her own story, Cox discusses the effect of words and what power there is in peeling back the layers that the world has projected on our bodies and minds.

Key Highlights:

1. Eating disorders thrive in silence and shame, and can make us feel alone. Sharing our stories can make us feel less alone, and that is a powerful tool for change.
2. There are so many ways to share your story, from face to face conversations, to spoken word, visual art, public speaking, social media, and blogging.
3. Not all stories will be appropriate for all audiences. Be mindful that you are sharing “from your scars, not your open wounds” to aid with creating a more universal story.

IF YOU ARE INTERESTED IN LEARNING MORE ABOUT NEDIC'S PROGRAMS AND SERVICES, OR TO JOIN OUR EMAIL LIST, VISIT NEDIC.CA OR CALL 1-866-NEDIC-20 (1-866-633-4220 OR 416-340-4156 IN TORONTO)

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